B & G proj. #: 2017-37

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

*** SUB chapter 8 ***

Check # 8296 2 4 2017		E	C	E		\mathbb{V}	.In
	Chec	k#8	296	2	A	2017	

	100				0000	парі	CIO	lal ha	WAR	4 (2017 1
Date of Notification (1	1)	11	Name of B	uilding Ow	ner/Operator (2	2)					į
10 13 1/12 12 1/	/ 1 7		Mahwa	h Board	of Education	1		A	SBESTOS	CON	JTROL &
	Type Notifica	tion	Street Add	ress						Non	
☐ EPA	X Initial		60 Ride	ge Avenu	ıe						
☐ DEP	i i i i i i i i i i i i i i i i i i i	11	City, State,								
X DOL	Amend			ah, NJ 07	7430						
X DOH		11	Name of Co					Telephor	ne Number		HINDS CONTRACT
☐ DCA	☐ Cancel				Encode of			T Glopiloi	io marribor		
			Scot V	an De M	lark						
				FAC	CILITY INFORM	1ATIO	N				
Name of facility where	e abatement	is taking p	lace (3)					Type of Facility			****
George Washing	aton Elem	entary S	chool (Si	ıb 8)					ol (K - 12)		
Street Address									napter 8 (Oth		
39 Fardale Ave	nue								(Private/Con /Homes, etc.	mercia	II.
								Square Feet	# of Floors		Bldg. Age
City (5)		Cou	inty (6)			5.05	unty Code (7)		2		0 years
Mahwah, NJ 07	7430	Be	ergen			(St	ate use only)	Current Use (P school	rior if being o	lemolis	hed)
Name of Monitoring F					ASCM No.	-	Name of Abatement C				
RK Occupation	al & Envir	onmenta	l Analysi:	S	0090		B & G Restoration	on, Inc.			
Street Address							Street Address				***************************************
401 ST. James	s Ave						105 Ryerson Ro	oad			
City, State, Zip Code Phillipsburgh, N	VI 0006E						City, State, Zip Code				
							Lincoln Park, N	IJ 07035			
Project Manager for Mo		n		hone Numb			Telephone Number (973)696-6869		License No		
Jonathan Gilbe				08-454-6	SERVICE OF		Name of OSHA Monito		1	0	
Scheduled Start Date ((10)		d. Completi	on Date (1	1)		B & G Restoration				
04/10/2017		04/	16/2017				Street Address				
Occupancy Status Duri	NAME OF TAXABLE PARTY OF TAXABLE PARTY.						105 Ryerson Ro	ad			
Facility closed/va Abatement perfo							City, State, Zip Code				
Describe:		or normal	racility flou	15-		_	LincolnPark, NJ	07025			
Other-Describe:						-	Lincompark, NJ	07035			
Scope of Work (check						-		-			
Demolition	X	Renovation	on			X	Full Containment w/nega	tive pressure	Glovebag	proced	dure
		≥160 sf or	-				Mini-enclosure	[☐ Non-friab	le proc	edure
Location of			n normally enance/cus		У		200		F	1 1 2 2	E E
asbestos-contain material to be	ning	staff(12)			Description material (sbestos-containing	Amount (Specify S	For n	n p	c n
abated in facility	(13)	Yes	No	N/A	Illaterial (ACIVI)		LF)	. or	a	a L
Boiler room		X			l bailer inau	latio		000 15	e		
- Donet room		_ ^			boiler insu	latioi	1	220 lf	[2	뉘片	++++
					1					卄片	++++
					1					##	++++
										+	
Registered Waste Haule	er		EP Hauler	D# C	ubic Yards of V	Vaste	Name of Registered L	andfill		111	1-1-
B & G Restoration	n, Inc.		19563		4		Tullytown R	esource & Re	covery Ce	nter	(4
City, State Lincoln Park, NJ				Disposal D 04/17/			City, State Tullytown, P.	Δ			
Completed by (Print or	Type\ I	Title			Signature				Date		1
Gordana Luna	, ype)		ry/Treasu	ırer	J.gaturo	j	Gordana Luna		03/22/2	017	
The state of the s							The state of the s		1		

CK# 5319

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 8:50 and 42:400)

Print Form

Date of Notification (1)				Int to NJA				1			0.17	. 01	247	
03/22/2017			Name	e of Buildin	g Owner	/Operato	r (2)	- Comment	L. Ini	MAR	2	1 21	11/	-
Agencies Notified Type Notifica	tion			nship of	Maple	wood			į			LAVERTE		
	uon		10 200	Valley S	*				ASE	SEST)S(MOC	THO	L 8
DEP Manage	d			State, Zip (LIC	EN	SINC	à	
X DOL Amenda	nent#			olewood,I		40								
∑ DOH Emerger	ncy (including	3		of Contact		40								
DOH justificati			1	l Kittner	τ				Teleph	ione Nu	ımbe	г		
									_					
Name of Facility Where Abatement is Ta	aking Place (3)	FA	CILITY INF	ORMAI	ION	Tue	e of Facility (4)-				-	
Maplewood Hilton Library							1 90	2.1	200					
Street Address							H	School (K-1 Subchapter	2) 8 (Other t	hau 16 d	01			
1688 Springfield Ave							×	Other (i.e. p	rivate & co	nan K-1	2) ial bu	uilding	s hor	me
City (5)			-					etc.)				anomig	5, 1101	1100
Maplewood, NJ 07040								are Feet 000+	# of Flo	ors			Age	
County (6)			Count	y Code (7)					1			50+	8	
Essex			(STATE	EUSE ONLY	n			ent Use (Prio	r if being o	lemolis	hed)			
Name of Monitoring Firm Hired by Buildin	ng Owner (8)	1	ASC	CM No.		Nome		rary						Gas Tel
Matrix New World Engineering,	Inc.		N/A			Hame	OF AD	atement Cont	tractor (9)					
Street Address			1					Diagnostic	LLC					
26 Columbia Turnpike						Street	DOM:	ild Ave						
City, State, Zip Code														
Florham Park,NJ 07932								Zip Code					2 2 7 2 111000	
Project Manager for Monitoring Firm			Telepho	one No.				dale,NJ 07						
Matthew Sheldon		- 1		240-1800		Telepho			1	ense N	0.			
Start Date (10)	Schedule	ed Co		Date (11)		973-9		S 1986-77	01	181				
04-03-2017	05-30-2	2017	, inpicuon	Date (11)				HA Monitor						
Occupancy Status During Abatement (Ch	eck Only On	e)						iagnostic l	LC					
Facility Closed/Vacated During Entir						Street A		ss ild Ave						
Abatement Performed ()utside of No	rmal Facility	Hour	nent s			= 17		3.5						
Other - Describe: 7:00am-4;00pm			7/ 					ip Code	400					
Scope of Work (Check All That Apply)						DIOOII	illige	dale,NJ 07	403					
≥3 sf or ≥3 lf	X R	enova	tion											
× ≥160 sf or ≥260 lf	in the second	emolit					Ful	l Containmen ni-Enclosure	t with Neg	ative P	ressu	ıre		
	15-25-15K							vebag Proce	dure					
						×	Nor	n-Exempted (*) and No	n-Friabl	e Pro	cedu	re	-
1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Locati											emen	t
Location of Asbestos-Containing Material (ACM)		ormal I Sole			Desc	cription o	f					13	/pe	_
TO BE ABATED		ntenar		Aspesti (i.e. i	os Conta thermal s	ining Ma	terial	(ACM)	Amour		_		m	١,
In Facility (13)	Custo	(12)	starr?		surfaci	ng, VAT,	or	uon,	(Specif SF or L	y =)	Rem	Re	cap	Eliciosure
(10)	-				other mi	scellane	ous)			,	Removal	Repair	Encapsulate	usu
	Yes	No	N/A								=		ate	e
Exterior		х		,	Windov	v Caulk	rina		554LF					-
						· oddin	19		JJ4L1		х			
(5)														
ame of Registered Waste Hauler			JDEP W		Cubic Ya		T	Name of Re	gistered L	andfill				
azmat Diagnostic LLC		100000000000000000000000000000000000000	auler ID I 35440		of Waste	€		G.R.O.W.	7.000000000000000000000000000000000000					
ty, State		100	100440		TBD									
oomingdale,NJ					Disposal TBD	Date		City, State						
ompleted by	Title						2	Morrisville	P,PA					
atiana Rotaru		t Co	ordinate	or	Sigi	nature	, ,			Date			V	
	1 10,00	. 000	Julial	UI		W	7	,		03/2	22/2	017		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

NO CH	NO	ΓIFIC (F	CATIO	N OF AS	SBESTOS ABA AC 8:60 and 5:1	TEMENT	(D),E	G I		<u> </u>	
Date of Notification (1) 2 / 22 /				ne of Buildin e rizon	ng Owner/Operator	(2)	M M	AR	2 4	20	17
Agencies Notified ☐ EPA ☐ DOLWD ☐ DHSS ☐ Type Notifi ☐ Initial ☐ Amenda ☐ Amenda		7/17	15 City,	State, Zip	ntgomery Place,	Lower Level	ASBES	STOS	S CC ENSI	NT NG	ROL
	ency (includin			ttsburgh, e of Conta	PA 15212		Telephone Num	her		+	
☐ Cancell	ation		Ar	nthony Po	orta		· · · · · · · · · · · · · · · · · · ·				
Nome of Facility Nati			FA	CILITY II	NFORMATION				=		
Name of Facility Where Abatement is Verizon Glassboro CO Street Address 5 Focer St.	Taking Place	(3)				Other (i.e.,	2) 8 (Other than K-12 private and comme	?) rcial t	ouildir	ıgs,	
City (5)						homes, etc	# of Floors	Te	olda i	\~~	
Glassboro						oquare r cer	# 01 110015	6	Bldg. A	age	
County (6) Gloucester			Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (P	rior if being demolis	shed)			
Name of Monitoring Firm Hired by Bui	ilding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))	Wart			
USA Environmental Managem	ent	5 50				VIRONMENTA					
Street Address					Street Address		,				
8436 Enterprise Ave					1123 BEAVE	R STREET					
City, State, Zip Code					City, State, Zip Co	ode	, , , , , , , , , , , , , , , , , , , ,			-	-
Philadelphia, PA 19153					BRISTOL, PA	19007					
Project Manager for Monitoring Firm			ephone		Telephone No.		License No.	7-25-			
Mark Jenkins				5-5810	215-788-6040	Ē	00509				
Start Date (10)3 /13 /17	Scheduled C			200 00000	Name of OSHA M BRISTOL EN	lonitor VIRONMENTA	L. INC.				
Occupancy Status During Abatement (Street Address		,				
☐ Facility Closed/Vacated During Entil ☐ Abatement Performed Outside of N	ormal Facility	Hou	rs - Des	scribe	1123 BEAVER City, State, Zip Co						
Time of Abatement:AM Scope of Work (Check all that apply)	PM/ <u>5:00</u>	РМ- <u>1</u>	:30 _{AM}		BRISTOL, PA						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	⊠ Rei □ Dei				☐ Mini-Encl	Procedure	gative Pressure	e			
Location of		Locat						T	atem	ent T	ype
Asbestos-Containing Material (ACN TO BE ABATED IN Facility (13)	(I) Used Mai	d Sole	ely by		Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Boiler room	Yes	No	N/A			103)				ate	
The second secon					e and mastic		50 SF				
Basement Office				Floor tile	e and mastic		320 SF				
Name of Decision 1997											
Name of Registered Waste Hauler SERVICE TRANSPORT GROUP	P, INC.		JDEP V auler ID 20990	No.	Cubic Yards of Waste	Name of Regis MINERVA I					
City, State NEW CASTLE, DE 19720					Disposal Date	City, State	URG, OH 44688				
Completed By (Print or Type) Brian Scafiro	Title Estimate	or			Signature	lasti /	Date	e //1	1/1	7	

ASB-41

B517020

* Do not use this form for asbestos licensure exempted activities.

NT OR # 3158

Date of Notification (1)					Т	Nam	e of Buildin	200	Owner/Operator ((2)	11	3 P	0	= 1	D.C		pant)
	22 /	1	7				erizon	ig c	Jwilei/Operator ((2)		1) [G	5	\mathbb{V}		
Agencies Notified T	 Γype Notifi				+	Stree	et Address				111	1/1		-21,30,000			111
⊠ EPA 2229	⊠ Initial							nta	omery Place,	Lower Level		ll M	IAR	21	201	7	
	Amende				+		State, Zip				1	107	PUL	C +	201	1	1
□ DHSS 21/2	Amend			_			ttsburgh,						-	-	The fire is all the	na militara anga	
DCA (NJAC 5:23-8)	Emerge justifica		nciuair	ıg	-	Nam	e of Conta	ct		4	1	ASBE Telephone	STOS	ber	MTF	OL	&
	Cancell					Ar	thony Po	orta	1				LICE	INDI	NG		
						FA	CILITY II	NFC	ORMATION						-	7	
Name of Facility Where Aba	atement is	Takir	ng Plac	e (3))					Type of Facili	ty (4)						
Verizon Glassboro Co	0									School (K-	12)						
Street Address										☐ Subchapte ☐ Other (i.e.,	oriva	Other than	n K-12 omme	!) rcial b	uildin	as.	
5 Focer St.				20000				1000		homes, etc	c.)					3-1	
City (5)										Square Feet		# of Floo	rs	В	ldg. A	ge	
Glassboro																	Grant Comme
County (6)						Cou	nty Code (7)(S	TATE USE ONLY)	Current Use (F	Prior	if being d	emolis	shed)			
Gloucester								1									
Name of Monitoring Firm Hir		er same	Owner	(8)	A	SCM	No.	N	lame of Abateme								
USA Environmental M	lanagem	ent						1	BRISTOL EN	VIRONMENT	AL,	NC.					
Street Address								1 00	treet Address								
8436 Enterprise Ave		4000000						_	1123 BEAVER								
City, State, Zip Code	2						5.5	1	ity, State, Zip Co								
Philadelphia, PA 1915 Project Manager for Monitori				TE	eleph		No	_	BRISTOL, PA	19007				AFFECT			
Mark Jenkins	ing Film						i-5810	1	elephone No. 215-788-6040			License N					
Start Date (10)	- 1	School	fuled C				ite (11)		ame of OSHA Mo	onitor		00509					
3 /13 /							17	1	BRISTOL ENV		AL, I	NC.					
Occupancy Status During Ab	patement (Chec	k only	one)				St	reet Address								
☐ Facility Closed/Vacated D						ent			1123 BEAVER	STREET							
Abatement Performed Ou							cribe	Ci	ty, State, Zip Coo	de							_
Time of Abatement:	AM	PI	M/ <u>5:00</u>	PM-	1:30	<u>AM</u>		1	BRISTOL, PA	19007							
Scope of Work (Check all tha	at apply)			V					⊠ Eull Conto	inmont with N	4	. D					
≥3 sf or ≥3 lf			⊠ Re	nova	ation				☐ Mini-Enclo	inment with Ne osure	gativ	e Pressu	re				
≥160 sf or ≥260 lf			☐ De	moli	ition				Glovebag		-	=					
	***		Is	Loc	ation	1	Τ		☐ Non-Exem	npted (*) and No	on-Fr	lable Pro	ceaure	1		-17	
Location of			1	Norm	nally				Description of						ateme	0.555	
Asbestos-Containing Mate		1)			olely nanc				Containing Mate			Amount		Ren	Repair	Enc	Enc
TO BE ABATED IN Facility	2				al Sta		(i.e.		ermal systems in surfacing, VAT, o			(Specify SF or LF	/	Removal	air	aps	Enclosure
(13)			Yes	(12 No		N/A			ther miscellaneou			0, 0, 2,	,	-		Encapsulate	е
Boiler room					-		Fl 4:1		nd mastic			50.05		57			
					-	3						50 SF					븬
Basement Office			Ц		-	<u> </u>	Floor tile	e ai	nd mastic			320 SF			Ц	Ц	Ц
			Ш		-]											
Name of Registered Waste Ha				112	NJD Haul		Vaste		bic Yards of ste	Name of Regis							
SERVICE TRANSPORT	GROUP	, INC				990				MINERVA	LAN	DFILL.					
City, State	7,	nira-iri						Dis	posal Date	City, State				2			
NEW CASTLE, DE 1972	.0									WAYNESB	URC	G, OH 44	1688				
Completed By (Print or Type)		Title							Signature	1 0	1		Date	7	1.0	,	\neg
Brian Scafiro		Es	timat	or					Brisa	Scufiro	17	l	2/	22/	11	1	

Date of Notification (1)				Name o	f Building (Owner/Operator (2	2)					
03 /	17 / 17		- 1		on the second of the second	nunications	**	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	IAR 2	4	2017	1
Agencies Notified	Type Notification	_		Street A	ddress					- 1		
⊠ EPA	☐ Initial		- 1		illiam Stı	reet		4055	STOS	00	UTR	01 8
⊠ DOLWD	☐ Amended		- 1	City. Sta	ate, Zip Co	de		ASBE	LICE	NSI	IG.	7
□ DOH	Amendment #				ark, NJ, 0			Annual of the second of the se	2001			
DCA	Emergency (incliging justification)	uding			f Contact			Telephone Numb	per			
(NJAC 5:23-8)	Cancellation				Baylor							
				FAC	LITY INF	ORMATION					188-200	
Name of Facility Where A	Abatement is Taking	Place (3)				Type of Facility (4)	- 70.00			
Market Central Offi							☐ School (K-12		i.			
Street Address							Subchapter 8	(Other than K-12 ivate and commer) cial buile	dings		
95 William Street							homes, etc.)					
City (5)							Square Feet	# of Floors		g. Age	9	
Newark							425,442	12	i	- 50		
County (6)				Count	y Code (7)(STATE USE ONLY)		or if being demolis	shed)			
Essex								nmunication				
Name of Monitoring Firm	Hired by Building O	wner (8) <i>F</i>	SCM N	lo.	Name of Abateme						
USA Environmenta	al Management In	С		27-01		BRISTOL EN	VIRONMENTA	L, INC.				_
Street Address						Street Address						
8346 Enterprise Av	renue					1123 BEAVE						
City, State, Zip Code						City, State, Zip C						
Philadelphia, Pa, 1						BRISTOL, PA	19007	License No.				-
Project Manager for Mor	nitoring Firm			ohone N	erroren I	Telephone No.		00509				
Mark Jenkins			. NEC	53655		215-788-6040 Name of OSHA N		00303	11.50			-
Start Date (10) 04 / 06 /	17 Schedu			ion Dat			VIRONMENTA	L, INC				
Occupancy Status Durin		only o	ne)			Street Address						
☐ Facility Closed/Vacat				nent		1123 BEAVR	STREET					
Abatement Performe	d Outside of Normal	Facility	Hour	s - Desc	cribe	City, State, Zip C	ode					
Time of Abatement:	AMPN	1/ <u>5:00</u> 1	PM- <u>1:</u>	30AM		BRISTOL, PA	A 19007					
Scope of Work (Check a	all that apply)					⊠ Full Cor	ntainment with Ne	native Pressure				
☐ >3 sf or >3 lf		⊠ Re	novati	on		Mini-End	closure	94				
≥160 sf or ≥260 lf		☐ De	molitic	n		☐ Gloveba	g Procedure	on-Friable Procedu	ıre			
		lo	Locat	ion		□ Non-Exc	empled () and 140	Thable 1 1000		ateme	ent Ty	/pe
Location	n of	1,000	lorma			Description	of					
Asbestos-Containing	N. 15.17.	1	d Sole		Asbes	stos Containing M	aterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE AB		100000	intena odial	Staff?	(i.e.	., thermal systems surfacing, VA		(Specify SF or LF)	oval	=	nsc	sure
IN Fact			(12)			other miscellan					ate	(D
		Yes	No	N/A					-			
5th/8th/9th Floor Hally	ways				VAT/Ma	stic		3200 SF		Ш		
Basement G Stairwa	ay Landing/Hall				VAT/Ma	stic		110 SF				
Basement G Chiller	plant storeroom			\boxtimes	VAT/Ma	stic		270 SF				
Basement H Stairwa	ay Landing			\boxtimes	VAT/Ma	estic	5536-F34-51-4557-31-00-5.	280 SF				
Name of Registered Wa			110	JDEP V		Cubic Yards of Waste		istered Landfill				
SERVICE TRANSF	PORT GROUP, INC	C.		20990		49		LANDFILL				
City, State	700 M					Disposal Date	City, State	DIIDG OU				
NEW CASTLE, DE						TBD	WATNES	BURG, OH	2-4-			
Completed By (Print or			19.30			Signature	De C	10	Date	7/	1	
Dillan DeCaro	E	stima	tor			Della	n De Caro	1-10	9/1	1//	/_	
ASB-41				272								

* Do not use this form for asbestos licensure exempted activities.

JAN 13 DD 17067

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Date of Notification (1)							Operator (2)		IM				1000
03/	17 / 17		'	Verizo	n Comm	unica	ations		III MAR	24	20	17	LUMB W
Agencies Notified EPA	Type Notification ⊠ Initial		7.0	reet Ad	dress Iliam Stre	et			C COST THE		en a monte		
☑ DOLWD	☐ Amended				e, Zip Cod				ASBEST	OS CO DEMS	DIAL	KUL	. a
⊠ DOH	Amendment #	To a succession of the	1		rk, NJ, 07				Commercial property of the second		11.53.4		
□ DCA	Emergency (in justification)	cluding	Na	ame of	Contact				Telephone Number				
(NJAC 5:23-8)	☐ Cancellation			Alex E	Baylor				8.				
				FACIL	ITY INFO	RMA	ATION						
Name of Facility Where	Abatement is Takin	g Place (3						Type of Facility (4	.)				
Market Central Off		9	,				1	School (K-12)	(OU) th 1/ 12\				
Street Address	100							☐ Subchapter 8 (☐ Other (i.e., priv	(Other than K-12) vate and commercia	al build	lings,		
95 William Street								homes, etc.)	W				
City (5)								Square Feet	# of Floors		. Age		
Newark								425,442	12		- 50		_
County (6)				County	Code (7)(S	TATE	USE ONLY)		or if being demolished	ed)			
Essex								Verizon Com	munication				_
Name of Monitoring Firm	n Hired by Building	Owner (8	AS	SCM N	0.			nt Contractor (9)					
USA Environment						BRI	ISTOL EN	/IRONMENTAL	., INC.				_
Street Address							Address						
8346 Enterprise A	venue						3 BEAVER					V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-
City, State, Zip Code					(State, Zip Co						
Philadelphia, Pa,	19153						ISTOL, PA	19007	License No.				-
Project Manager for Mo	nitoring Firm			none N			hone No.		00509				
Mark Jenkins				36558			of OSHA N		00000				-
Start Date (10)	1000 Contractor (1000 Contractor)	eduled Co						VIRONMENTAL	INC				
04 /06	· — — — —	04_ /		_ ′ _				VIICOMMENTAL					-
Occupancy Status Duri	ng Abatement (Che	ck only or	ne)				t Address 23 BEAVR	CTDEET					
☐ Facility Closed/Vaca	ated During Entire F	Period of A	batem	ent	rihe								
Abatement Perform Time of Abatement:	ed Outside of Norm AM-	PM/5:00F	PM-1:3	OAM	, ibe		State, Zip Co						
						DIV							
Scope of Work (Check	all that apply)							tainment with Neg	gative Pressure				
≥3 sf or ≥3 lf		⊠ Rei					Mini-End ⊠ Gloveba	a Procedure					
≥160 sf or ≥260 lf		☐ De	molition	1			☐ Non-Exe	empted (*) and No	n-Friable Procedur	е			
		Is	Locati	on						Aba	ateme		
Locati	on of		lormal d Sole				Description	of aterial (ACM)	Arnount	Rer	Repair	Enc	Enclosure
Asbestos-Containing		100000	intenar	*	Asbes (i.e.	tos C	mal systems	insulation,	(Specify	Removal	air	aps	losu
TO BE A		Cus	todial S	Staff?		SU	irfacing, VAT	Γ, or	SF or LF)	<u>a</u>		Encapsulate	Te
(1:	3)		(12)	N/A		oth	er miscellan	eous)				æ	
		Yes	No				l letion		40 LF		П	П	
Boiler Room Wate					•		Insulation		45 LF				
Boiler Room Cond	lensate Tank						ion & Fittir		4 LF		П	П	П
Boiler Room Tank	Area				-		Insulation		5 LF				
Boiler Room Adja							Insulation		istered Landfill		1-		
Name of Registered V	Vaste Hauler	CUATE	1000	IJDEP I		Cub	ic Yards of ste		LANDFILL				
SERVICE TRANS	SPORT GROUP,	INC.	- 1	2099		49	9						
City, State						2-27-22-6	oosal Date	City, State	BURG, OH				
NEW CASTLE, D	DE					T	BD	WATRES		ate /		/	
Completed By (Print	or Type)	Title					Signature	1 DLA	1:0	ate //	7/	17	
Dillan DeCaro		Estima	ator				Dell	an De Car	1 / ft	/	/		

Chk# 3184

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

				(P	ursuai	nt to NJA	AC 8:60 and 5:1	6)	MEG	[F]	1 1	7 [i pin
Date of Notification (1)					Name	of Buildin	g Owner/Operator ((2)			I IA	IE.	
3 /	20 /	17	•		- Transact		nmunications						
Agencies Notified	Type Notific	ation			Stree	t Address			HIH- MAR	2 4	20	1/	1 3 1 1 Seed
Contract of the Contract of th	Initial				700000000	West Mil	ton Ave		Shel bed				transm
	☐ Amende	The second			1000	State, Zip (derivation and the second	of the state of	re barrang a rich	ranion d	METERS.
⊠ DOH	Amendm					hway, NJ			ASBESTO	8 CU ENSI		-KUU	-ů
DCA (NJAC 5:23-8)	☐ Emerger justificat	icy (ir ion)	iciuain	3		of Contac	5/1972 _ 25/25/2 ()		Telephone Numb	ingle of the dist	100000		atter was the
	☐ Cancella				Ale	x Baylor							
					FA	CILITY IN	FORMATION						
Name of Facility Where Ab	atement is	Takin	g Place	(3)				Type of Facility	(4)				
Rahway Central Office	ce							School (K-12					
Street Address									8 (Other than K-12) rivate and commerce		ildin	10	
90 West Milton Ave								homes, etc.		Jiai Di	mani	, jo,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Rahway								40,730	3		+- 50)	
County (6)		-0000		V 363	Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)			
Union													
Name of Monitoring Firm H				(8)	ASCM	No.	Name of Abateme						
USA Environmental	Managem	ent li	nc.				BRISTOL EN	VIRONMENTA	L, INC.				
Street Address							Street Address						
8346 Enterprise Ave	nue						1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co	ode					
Philadelphia, PA, 19							BRISTOL, PA	19007					
Project Manager for Monito	ring Firm			11000	ephone		Telephone No.		License No.				
Mark Jenkins					153655	0.0000000	215-788-6040	E	00509				
Start Date (10)				0.5	etion Da		Name of OSHA M	1onitor					
04 /10 / _	17	()4/	1	9_/_	17_	BRISTOL EN	VIRONMENTA	L, INC				
Occupancy Status During A	Abatement (Chec	k only o	ne)			Street Address						
☐ Facility Closed/Vacated							1123 BEAVE	R STREET					
Abatement Performed C						cribe	City, State, Zip Co	ode				11150	$\neg \neg$
Time of Abatement:	AIVI	P	VI/ <u>5:00</u>	PIVI-1	:30AW		BRISTOL, PA	19007					
Scope of Work (Check all t	hat apply)						· -	252 47 52025122	1600 FEE				
≥3 sf or ≥3 lf			⊠ Re	novat	ion			tainment with Neg losure	gative Pressure				
≥160 sf or ≥260 lf				moliti			☐ Glovebag	g Procedure	SA SANSAN				
							∐ Non-Exe	mpted (*) and No	n-Friable Procedure	1			
Logation of				Loca Norma			D			Ab	atem	ent T	уре
Location of Asbestos-Containing M		1)	Use	d Sol	ely by	Asbe	Description o stos Containing Ma		Amount	Rer	Repair	Enc	Enc
TO BE ABAT	ED			intena	ince/ Staff?		., thermal systems	insulation,	(Specify	Remova	air	aps	Enclosure
IN Facility (13)			Ous	(12)	Otan:		surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	ıre
()			Yes	No	N/A		ourse intocenario	000)				e	
Basement Power Room	n					VAT/Ma	stic		144 SF	×			
Basement Adjacent Re	ar Stairwe	ell				VAT/Ma	stic		105 SF		П	П	П
Basement - 1st Floor St	tairwell La	nd.				VAT/Ma	stic		45 SF			$\overline{\Box}$	
1st Floor Stairwell Hally	vav/Landi	na		П		VAT/Ma	stic		120 SF				
Name of Registered Waste	•			1	IJDEP \		Cubic Yards of	Name of Regis					
SERVICE TRANSPOR		, INC	Э.	F	20990		Waste 6	MINERVA					
City, State							Disposal Date	City, State				100	\neg
NEW CASTLE, DE							TBD	WAYNESB	URG, OH				
Completed By (Print or Typ	e)	Title)	=200=			Signature		/ Dat	е			$\overline{}$
Dillan DeCaro		E	stimat	or			1)21/11	1 DeCara	1(11-13	5-2	0-	17	

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702	-5115	Check #9	MAF 012	? 2	4 2	2017	
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			Walter State of State				1
	Tele	ephone Nun	nber				
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(K-	r 8 (Other	er than K-12 and comme	2) ercial b	ouildin	ıgs,		
et	5.45	f Floors	В	ildg. A	Age		1
e (F	Prior if b	eing demoli	shed)				1
ho	- Inc.						
or (S	*)						
25							
		ense No. 0529					
							1
_							1
	gative F	Pressure					
No	n-Friab	le Procedur	re				
				atem	ent T	T	
	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
	3	35 LF					
	5,8	300 SF					
	stered L . Land						
	uiiu						

Date of Notification (1)		Nan	ne of Buildi	ing Owner/Operator	(2)					
2	17	P	ennsville	Township BOE	/ Job #1702	5115 Check #9	012	? 2	4 2	2017
Agencies Notified Type Notif	ication		et Address							
☑ EPA ☑ Initial		30	Church	Street		ASE				TRO
☑ DOLWD ☐ Amend		City,	State, Zip	Code		The same of the sa		CEN	SHUI	<u> </u>
☐ DHSS Amend	ment # ency (including	Pe	ennsville,	NJ 08070						
(NJAC 5:23-8) justifica		Nam	e of Conta	ct		Telephone Nun	nher			
Cancell	2070	M	ichael Sir	npkins		Totophono Hun	1001			
Nome of Facility Miles At 1			ACILITY I	NFORMATION		· ·				
Name of Facility Where Abatement is	Taking Place (3))			Type of Facility	100f				
Pennsville Memorial HS					School (K-1		2)			
Street Address						8 (Other than K-12 private and comme		uildin	as	
110 South Broadway					homes, etc.			8		
City (5)					Square Feet	# of Floors	В	ildg. A	ge	
Pennsville, NJ 08070										ĺ
County (6)		Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pi	rior if being demoli	shed)			
Salem				*10	High School	ol				
Name of Monitoring Firm Hired by Bui	Iding Owner (8)	ASCN	l No.	Name of Abateme	ent Contractor (9))			_	
Health & Safety Services				AbateTech, In	nc.					
Street Address				Street Address	V - 700					
PO Box 365				30 Maple Ave	. PO Box 25					
City, State, Zip Code				City, State, Zip Co	ode					
Berlin, NJ 08009				Lumberton, N	IJ 08048					
Project Manager for Monitoring Firm	Te	elephone	No.	Telephone No.		License No.	-			-
Jim Proctor		609-839	-2432	609-265-2107		00529				
Start Date (10)	Scheduled Comp	letion Da	ate (11)	Name of OSHA M	onitor					-
5/8/17	_ 5 / _2	26_ /	17	EMSL Analyti	cal					
Occupancy Status During Abatement (Check only one)			Street Address						-
☐ Facility Closed/Vacated During Enti	re Period of Abat	tement		200 Route 130	0 North					
Abatement Performed Outside of N	ormal Facility Ho	urs - Des	cribe	City, State, Zip Co	de					-
Time of Abatement:AM	PM/PN	Λ	AM	Cinnaminson						
Scope of Work (Check all that apply)				100000000000000000000000000000000000000						-
≥3 sf or ≥3 if	□ Renova	ation		☐ Full Conta	ainment with Neg osure 60 Vaup	ative Pressure				
≥160 sf or ≥260 lf	☐ Demolii			☐ Glovebag	Procedure					
				Non-Exen	npted (*) and No	n-Friable Procedur	re			
	Is Loca Norm						Ab	ateme	ent Ty	уре
Location of Asbestos-Containing Material (ACM			Ashor	Description of stos Containing Mate		Americat	Re	Re	Щ	ш
TO BE ABATED	Mainten	ance/		, thermal systems in		Amount (Specify	Removal	Repair	ıcar	ıclo
IN Facility	Custodia (12			surfacing, VAT,	or	SF or LF)	val	-	Encapsulate	Enclosure
(13)	Yes No	,		other miscellaneo	us)				ate	
Auditorium Attic		\boxtimes	Pipe Ins	ulation	12	335 LF				
Auditorium			Floor til	e & Mastic		5,800 SF		П		
								П		
									П	
Name of Registered Waste Hauler		NJDEP V	Vaste	Cubic Yards of	Name of Regist	ered Landfill				_
AbateTech, Inc.	1100	Hauler ID	No.	Waste	G.R.O.W.S.					
City, State		18750		40 Disposal Date						
Lumberton, NJ				5/26/17	City, State	DΛ				
Completed By (Print or Type)	Title				Tullytown,					
Gwendolyn Trumbetti	Title	C		Signature	, 1	Dat	71 -	101	7	
SB-41	Operations	Coordi	патог	UN	77		312	(i) [ľ	

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REST	38.00	ONITO	01.0	
	MAR	MAR 2.4	MAR 2 4 201 BESTOS CONTR LICENSING	MAR 2 4 2017 BESTOS CONTROL 8

- 100	1.		(, ,	ai saain	IO NUMO	0.00 am	G 12.12	,		A CAMPAGE		AR 2	1	2017	į	
Date of Notification (1)					f Building Real Est			(2)		Total State of the	101	411 - C	-61	<u> </u>	Talkasia premio, y due	
Agencies Notified	Type Notification			Street Address 16 Microlab Road, Suite A							ASBESTOS CONTROL LICENSING					
DEP X DOL	Amended Amendment				ate, Zip Co ston, NJ					111111111111111111111111111111111111111						
DOH DCA	Emergency justification) Cancellation			Name of Contact James Puleo					Telephone Number							
					LITY INFO	DRMATI	ON									
Name of Facility Where No Name	Abatement is Takin	g Place (3)	1 70	LITT HAT	JIMAII	014	Тур	e of Facility (70-175		
Street Address 1 Harrison Avenue								×	School (K-1 Subchapter Other (i.e. p	8 (Othe			dings,	home	s,	
City (5) Harrison								201000	etc.) are Feet 000	# of	Floors	1000	ildg. A	ge		
County (6) Hudson			County Code (7) (STATE USE ONLY)				Current Use (Prior if being demolished) Not in use									
	lonitoring Firm Hired by Building Owner (8) tex Companies, Inc.								e of Abatement Contractor (9) services, LLC							
Street Address 700 Turner Way, S	Address					Street				et Address W Lincoln Highway, Suite 500						
City, State, Zip Code Aston, PA 19014							City, S	tate,	Zip Code A 19341					1112-0		
Project Manager for Mo Dave Turotsy	hitoring Firm			Telephone No. 610-558-8902			Teleph	hone No. License No. 01161								
Start Date (10) 2/27/17		Schedule	ed Con	ompletion Date (11) Nan			1000	e of OSHA Monitor								
Occupancy Status Durin	ng Abatement (Chec						Street		ess				-	DE A		
Facility Closed/Vac Abatement Perform	ated During Entire I	Period of A	batem	nent			200	Rout	e 130 Nor Zip Code	th						
Other - Describe:						-	Cinn	amir	ison, NJ							
Scope of Work (Check / ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	Renovation Demolition						Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
			Locati	ally				tion of					Abatement Type			
Locatio Asbestos-Containing TO BE AB In Fac (13)	Material (ACM) SATED lity	d Sole ntenar odial S (12)	ly by nce/ staff?	tos Cont thermal surfa	itaining Material (ACM) it systems insulation, acing, VAT, or miscellaneous)		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure				
See Atta	ched	Yes	No	N/A								+				
N																
[] I I I I I I I I I I I I I I I I I I			0.000	NJDEP Waste Hauler ID No. Cubic Yards of Waste 40				Name of Registered Landfill GROWS Landfill								
City. State Newark, NJ			Disposal Date					City, State Morrisville, PA								
Completed by Jack Bally		oject	Signature								7					

ecoservices, LLC

MAR 2 / 2017

			- d 2	1817-11	1 4 4		15-1
Location of Asbestos Containing Material (ACM) To Be Abated In Facility	Is location normally used solely by Maintenance/ Custodial Staff? Yes No N/A	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	SBEST LI Removal	Name of	ent Type TROL 8 G Encap	Enclosure
1st floor brick building	N/A	flue pack	2 Sf	X	Kepaii	Спсар	Literosare
1st floor brick building	N/A	acpi	65 LF				
Brick building	N/A	VAT and mastic	50 SF	X			
Roof brick building	N/A	roofing	U	X			
Underground	N/A	transite duct	3,000 SF	X			
1 story building			30 LF	X			
1 Story building	N/A	roofing	1,200 SF	×			
				<u> </u>			

Date of Notification (1) 2/28/17)			NOTI	State of I FICATION OF AS Pursuant to NJA Name of Buildin Mercer Coul	SBESTO: AC 8:60 a	S ABA nd 12:	(120)), <u>E</u>	<u>G</u> Mar		4 2017
1	ype Notificati	ion		-	Street Address	ity iiipi	IOVIN	ent Aut	thority		ACOL	-07/	~~~	
EPA DEP] Initial			- 1	80 Hamilton	Ave 2n	d floo	NP.			HOBE	-51 (JS C	ONTR
X DOL			A	Ī	City, State, Zip C	ode	4 1100	,,,		-			JEINE	JIIVG
Free	Amendme Emergend	ont #_	Idina	-1	Trenton NJ 0	8611				1416 - 6				No. 2, 14 LP
DOH DCA	Justinicatio	n)	danig		Name of Contact					Y =				
	Cancellati				Jacqueline To	olbert				Teleph	none N	umbe	er	
Name of Facility Where Abate	ement is Tak	ina Pla	re /3		FACILITY INF	ORMATIC	ON							
more county improvi	ment Autho	ority F	orone	erh.			-Lice-e	Type	of Facility (4	1)	-			
Oneel Address		,						-	chool (K-12					
21 Clark St								II_I S	ubchapter !	R (Other th	an K-1	2)		
City (5)			_					N e	ther (i.e. pr	ivate & co	mmerc	ial bu	illdings	s, homes,
Trenton NJ								Square	Feet	# of Floo				
County (6)				TC	ount of the					1		- 1	Bldg.	Age
Mercer				(5	ounty Code (7) TATE USE ONLY)		1	Current	Use (Prior	if being de	maliel	and)		
Name of Monitoring Firm Hired	by Building (Owner	(8)		ASCM No.		-					100)		
Do Livilonmental			(-)	1	ASCM NO.	1	Vame o	of Abater	ment Contra	actor (9)				
Street Address							ACTIVE	e Envin	onmenta	Techno	logie	s Inc	:	
1000 Maplewood Dr						10	mee! W	Logress						
City, State, Zip Code Maple Shade NJ 08052								ine St						
maple Shade NJ 08052						B.	ny, Sta At Lia	ite, Zip C	ode			70.00		
roject Manager for Monitoring F Chris Macri	im			Tele	phone No.	To	denha-	lly NJ (08060					
lart Date (10)				856	6-755-9300	6	nepno: 00_7/	ne No. 02-150(se No.			
3/27/17	1 8	Schedu	led C	omplet	ion Date (11)			OSHA N		0129	99			
cupancy Status During Abatem	nent (Check (117	7	1		OO! DA N	lonitor					
ccupancy Status During Abatem Facility Closed/Vacated Duri Abatement Performed Outsic Other – Describe:	ng Entire Per de of Normal	Only Oi	/// ne)	117	7	Stre	set Add		-					
ccupancy Status During Abatem Facility Closed/Vacated Durin Abatement Performed Outsic Other – Describe: Ope of Work (Check All That Ap	ng Entire Per de of Normal	Only Oi	/// ne)	117	7	Stre	set Add	dress	-					
ccupancy Status During Abatem Facility Closed/Vacated Duri Abatement Performed Outsic Other – Describe:	ng Entire Per de of Normal ply)	Only Oi	Abate Hour	ment s	7	Stre	, State	dress P. Zip Confidence Full Contini-Encl	alnment wit					
Ecupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Dippe of Work (Check All That Ap. ≥3 sf or ≥3 if ≥160 sf or ≥260 if	ng Entire Per de of Normal ply)	Only Or Facility	Abate Housenova	ment's	7	Stre	, State	dress P. Zip Confidence Full Contini-Encl	de ainment wit			oced		
Ecupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Dipper of Work (Check All That Ap. ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material (A	ng Entire Per de of Normal ply)	Only Oil Facility Record Recor	Abate Housenova emovine cocation	ment's	7	City	, State	dress , Zip Coo Full Cont fini-Encl Slovebag lon-Exen	ainment wit osure Procedure			Oced	temer	nt
Ecupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Dipper of Work (Check All That Ap. ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material (A	ng Entire Per de of Normal ply)	Only Oil Facility Record Recor	Abate Housenova emova emova emoliti Soleli tenan	ment s	7 Asbestos Co	Stre City City	, State	dress A Zip Coo Full Cont Alini-Encl Blovebag Ion-Exen	ainment wit osure Procedure apted (*) an		able Pr	Oced	temer ype	nt
Ecupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Dipper of Work (Check All That Ap. ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material (A	ng Entire Per de of Normal ply)	Only Oriod of / Facility Rolling Rolli	Abate Housenova emova emova emoliti Soleli tenan	ment s	Asbestos Co (i.e. therms	City Description entaining i	, State	dress Jip Control Jini-Enci Slovebag Jon-Exen Al (ACM) lation,	ainment wit osure Procedure npted (*) an	d Non-Fria	able Pr	Aba	temer ype	
Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Dependent Performed Outsix Other – Describe: Location of Asbestos-Containing Material (A TO BE ABATED In Facility	ng Entire Per de of Normal ply)	Only Oriod of / Facility Recility Is L Nec Used Maint Custoc	Abate Housenova enova enova emolii Solei tenan dial Si	ment stion ion on y by ce/ raff?	Asbestos Co (i.e. therms surf other	City Description Intaining I al system facing, VA miscellar	, State Find of Materials insulation of the country of the countr	dress Jip Control Jini-Enci Slovebag Jon-Exen Al (ACM) lation,	ainment wit osure Procedure npted (*) an	d Non-Fria	able Pr	Aba	temer ype	
Ecupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Dipper of Work (Check All That Ap. ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material (A	ng Entire Per de of Normal ply)	Only Oriod of / Facility Recility Is L Nec Used Maint Custoc	Abate Housenova emova em	ment s	Asbestos Co (i.e. therms surf other	City Description Intaining I al system facing, VA miscellar	, State Find of Materials insulation of the country of the countr	dress Jip Control Jini-Enci Slovebag Jon-Exen Al (ACM) lation,	ainment wit osure Procedure npted (*) an	d Non-Fria		Oced	temer ype	nt Enclosure
Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Dependent Performed Outsix Other – Describe: Location of Asbestos-Containing Material (A TO BE ABATED In Facility	ng Entire Per de of Normal ply)	Only Oriod of / Facility Recility Is L Nec Used Maint Custoc	Abate Housenova enova enova emolii Solei tenan dial Si	ment stion ion on y by ce/ raff?	Asbestos Co (i.e. therms surf other	Description ntaining la system acing, VA miscellar	State F A C N n of Materials insulat, or	Full Control of the C	ainment wit osure Procedure npted (*) an	d Non-Fria	Removal	Aba	temer	
Ecupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Dipper of Work (Check All That Ap. ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material (A	ng Entire Per de of Normal ply)	Only Oriod of / Facility Recility Is L Nec Used Maint Custoc	Abate Housenova enova enova emolii Solei tenan dial Si	ment's stion on y by ce/ aff?	Asbestos Co (i.e. therms surf other	Description ntaining la system acing, VA miscellar	State F A C N n of Materials insulat, or	Full Control of the C	ainment wit osure Procedure npted (*) an	d Non-Fria	able Pr	Aba	temer ype	
Ecupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Dipper of Work (Check All That Ap. ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material (A	ng Entire Per de of Normal ply)	Only Oriod of / Facility Recility Is L Nec Used Maint Custoc	Abate Housenova enova enova emolii Solei tenan dial Si	ment's stion on y by ce/ aff?	Asbestos Co (i.e. therms surf other	Description ntaining la system acing, VA miscellar	State F A C N n of Materials insulat, or	Full Control of the C	ainment wit osure Procedure npted (*) an	d Non-Fria	Removal	Aba	temer ype	
Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Ope of Work (Check All That Appears of Section 1	ng Entire Per de of Normal ply)	Only Oriod of / Facility Recility Is L Nec Used Maint Custoc	Abate Housenova enova enova emolii Solei tenan dial Si	ment's stion on y by ce/ aff?	Asbestos Co (i.e. therms surf other	Description ntaining la system acing, VA miscellar	State F A C N n of Materials insulat, or	Full Control of the C	ainment wit osure Procedure npted (*) an	d Non-Fria	Removal	Aba	temer ype	
Facility Closed/Vacated During Abatem Facility Closed/Vacated During Abatement Performed Outsix Other – Describe: Other – Describe: Ope of Work (Check All That Ap. ≥3 sf or ≥3 if. ≥160 sf or ≥260 if. Location of Asbestos-Containing Material (A TO BE ABATED In Facility (13) Floor	ng Entire Per de of Normal ply)	Only Oriod of / Facility Recility Is L Nec Used Maint Custoc	ne) Abate / Hour enova enova emotif Sole tenan dial Si 12)	ment's stion ion on y by cel aff?	Asbestos Co (i.e. therm surf other So:) COA- Non Friab	Description ntaining la system acing, VA miscellar	State F A C N n of Materials insulat, or	dress A Zip Control A Jini-Encl Blovebag Ion-Exen A (ACM) Istion,	alnment wit osure Procedure apted (*) an (S SF	d Non-Frie	Removal	Aba	temer ype	
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^{*} Do not use this form for asbestos licensure exempted activities.